

Store Information and Walkability Around Store

1) Store ID: SAC - Dunton - 1
County - Neighborhood - Store Code

2) Census Tract: 0601000100

3) Name of Store: ABC Market

4) Coder Name/ID: LM

5) Date of visit: 01/01/10

6) Disposition: 1 Completed
(circle one) 2 Partial

7) Starting point: (cross streets)

Mark an "x" in the blank next to each item under a question. Then based on the items you marked, determine a rating for each question with 1 being the lowest and 5 the highest. Use the number of "x's" to guide you in a rating from what you encounter on the walk. When you are done, enter the rating for each question in the box at the bottom. Locations with good walkability will get lower scores and locations with poor walkability will get higher scores.

Q1. Did you have room to walk?

- ☒ No sidewalks, paths or shoulders
☒ Sidewalks were broken or cracked
☐ Sidewalks were blocked with poles, signs, shrubbery, dumpsters, etc.
☒ Sidewalks or paths started and stopped
☐ Something else _____
Description of problems: _____

Rating: (circle one) 0 1 2 3 4 5

Q2. Was it easy to cross streets?

- ☐ Road was too wide
☐ Traffic signals made us wait too long or did not give us enough time to cross
☒ Needed striped crosswalks or traffic signals
☒ Needed curb ramps or ramps needed repair
☐ Something else _____
Description of problems: _____

Rating: (circle one) 0 1 2 3 4 5

Q3. Did drivers behave well?

- Drivers
☒ Did not yield to people crossing the street
☒ Turned into people crossing the street
☒ Drove too fast
☐ Sped up to make it through traffic lights or drove through traffic lights?
☐ Something else _____
Description of problems: _____

Rating: (circle one) 0 1 2 3 4 5

Q4. Was it easy to follow safety rules?

Could you and your child ...

- ☒ Yes ☐ No Cross at crosswalks or where you could see and be seen by drivers?
☒ Yes ☐ No Cross with the light?
☒ Yes ☐ No Make it across the street before the light changed?
☒ Yes ☐ No Walk on side of the road facing traffic where there are no sidewalks?
☒ Yes ☐ No Easily stop, look, and listen

Rating: (circle one- use # of no's) 0 1 2 3 4 5

Q5. Did you feel safe on your walk?

- ☒ Loitering outside of buildings
☒ Panhandling
☒ Unleashed dogs
☐ Graffiti
☒ Something else XXX XXX XXXX
Description of problems: _____

Rating: (circle one) 0 1 2 3 4 5

Q6. Was your walk pleasant?

- ☒ Needed more grass, flowers, or trees
☒ Dirty, lots of litter or trash
☒ Dirty air due to automobile exhaust
☒ Bad smells or odors
☐ Something else _____
Description of problems: _____

Rating: (circle one) 0 1 2 3 4 5

Enter your
ratings for each
question and
add them up
for a total

Q1. 3
Q2. 2
Q3. 2
Q4. 5
Q5. 4
Q6. 4
Total: 20